





510(k) SUMMARY

VITEK® 2 AST-ST Penicillin

510(k) Submission Information:

Submitter's Name:

bioMérieux, Inc.

Address:

595 Anglum Road

Hazelwood, MO 63042

Contact Person:

Jolyn Tenllado

Director, Regulatory Affairs

Phone Number:

314 -731-8386

Fax Number:

314-731-8689

Date of Preparation:

July 12th, 2011

B. Device Name:

Formal/Trade Name:

VITEK® 2 Streptococcus Penicillin

Classification Name:

21 CFR 866.1645

Antimicrobial Susceptibility Test

Product Code LON

Common Name:

VITEK® 2 AST-ST Penicillin

C. Predicate Device:

VITEK® 2 AST-GP Amoxicillin for S. pneumoniae (K063597)

D. 510(k) Summary:

VITEK® 2 Streptococcus Penicillin is designed for antimicrobial susceptibility testing of Streptococcus species. VITEK® 2 Streptococcus Penicillin is a quantitative test intended for use with the VITEK® 2 and VITEK® 2 Compact Systems as a laboratory aid in the determination of *in vitro* susceptibility to antimicrobial agents. Penicillin has been shown to be active against most strains of the microorganism listed below, according to the FDA label for this antimicrobial.

Active In Vitro and in Clinical Infections against:

Beta hemolytic streptococci groups C and G Streptococcus pyogenes Streptococcus agalactiae Streptococcus viridans group Streptococcus pneumoniae

The VITEK® 2 Antimicrobial Susceptibility Test (AST) is intended to be used with the VITEK® 2 and VITEK® 2 Compact Systems for the automated quantitative or qualitative susceptibility testing of isolated colonies for the most clinically significant aerobic gram-negative bacilli, *Staphylococcus spp.*, *Enterococcus spp.*, *Streptococcus spp.* and clinically significant yeast.



10903 New Hampshire Avenue Silver Spring, MD 20993

bioMérieux, Inc. c/o Jolyn Tenllado Director, Regulatory Affairs 595 Anglum Road Hazelwood, Missouri 63042-2320 OCT 2 6 2011

Re: K112000

Trade/Device Name: VITEK® 2 Streptococcus Penicillin (≤ 0.06 - ≥ 8 µg/mL)

Regulation Number: 21 CFR 866.1645

Regulation Name: short-term Antimicrobial Susceptibility Test System

Regulatory Class: Class II

Product Code: LON
Dated: October 19, 2011
Received: October 20, 2011

Dear Ms. Tenllado:

We have reviewed your Section 510(k) premarket notification of intent to market the device referenced above and have determined the device is substantially equivalent (for the indications for use stated in the enclosure) to legally marketed predicate devices marketed in interstate commerce prior to May 28, 1976, the enactment date of the Medical Device Amendments, or to devices that have been reclassified in accordance with the provisions of the Federal Food, Drug, and Cosmetic Act (Act) that do not require approval of a premarket approval application (PMA). You may, therefore, market the device, subject to the general controls provisions of the Act. The general controls provisions of the Act include requirements for annual registration, listing of devices, good manufacturing practice, labeling, and prohibitions against misbranding and adulteration.

If your device is classified (see above) into class II (Special Controls), it may be subject to such additional controls. Existing major regulations affecting your device can be found in Title 21, Code of Federal Regulations (CFR), Parts 800 to 895. In addition, FDA may publish further announcements concerning your device in the <u>Federal Register</u>.

Please be advised that FDA's issuance of a substantial equivalence determination does not mean that FDA has made a determination that your device complies with other requirements of the Act or any Federal statutes and regulations administered by other Federal agencies. You must comply with all the Act's requirements, including, but not limited to: registration and listing (21 CFR Part 807); labeling (21 CFR Parts 801 and 809); medical device reporting (reporting of medical device-related adverse events) (21 CFR 803); and good manufacturing practice requirements as set forth in the quality systems (QS) regulation (21 CFR Part 820). This letter will allow you to begin marketing your device as described in your Section 510(k) premarket

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notification. The FDA finding of substantial equivalence of your device to a legally marketed predicate device results in a classification for your device and thus, permits your device to proceed to the market.

If you desire specific advice for your device on our labeling regulation (21 CFR Parts 801 and 809), please contact the Office of *In Vitro* Diagnostic Device Evaluation and Safety at (301) 796-5450. Also, please note the regulation entitled, "Misbranding by reference to premarket notification" (21 CFR Part 807.97). For questions regarding the reporting of adverse events under the MDR regulation (21 CFR Part 803), please go to http://www.fda.gov/MedicalDevices/Safety/ReportaProblem/default.htm for the CDRH's Office of Surveillance and Biometrics/Division of Postmarket Surveillance.

You may obtain other general information on your responsibilities under the Act from the Division of Small Manufacturers, International and Consumer Assistance at its toll-free number (800) 638-2041 or (301) 796-7100 or at its Internet address http://www.fda.gov/cdrh/industry/support/index.html.

Sincerely yours,

Sally A. Hojvat, M.Sc., Ph.D.

Director

Division of Microbiology Devices

Office of In Vitro Diagnostic Device

Evaluation and Safety

Center for Devices and Radiological Health

Enclosure

Indications for Use

510(k) Number (if known): *K//2∞*

Device Name:	VITEK [®] 2 <i>Strepto</i> (≤ 0.06 – ≥ 8 μ¢			
Indications For	r Use:			
Streptococcus sp with the VITEK® 2 vitro susceptibility	ecies. VITEK [®] 2 S 2 and VITEK [®] 2 Co / to antimicrobial a	Streptococcus Peni ompact Systems as gents. Penicillin ha	imicrobial susceptibility testing of icillin is a quantitative test intended for uses a laboratory aid in the determination of it as been shown to be active against most to the FDA label for this antimicrobial.	e in
Active In Vitro and	d in Clinical Infecti	ons against:		
Beta hemolytic st Streptococcus py Streptococcus ag Streptococcus vir Streptococcus pn	galactiae ridans group	C and G	•	
System for the au the most clinically	utomated quantitat / significant aerobi	ive or qualitative si	is intended to be used with the VITEK® 2 usceptibility testing of isolated colonies fo acilli, Staphylococcus spp., Enterococcus st.	ì۲
Prescription U: (Part 21 CFR 801	se <u>X</u> I Subpart D)	AND/OR	Over-The-Counter Use(21 CFR 807 Subpart C)	
(PLEASE DO PAGE IF NEE		ELOW THIS LI	NE-CONTINUE ON ANOTHER	
Concur	rence of CDRH	, Office of In Vit	tro Diagnostic Devices (OIVD)	
Division S Office of Evaluation		gnostic Device		
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